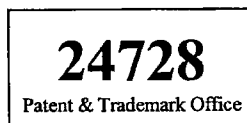


REVOCATION AND NEW APPOINTMENT OF POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS		ATTORNEY DOCKET NO. 20938.65092	
		U.S. APPLICATION SERIAL NO. 10/560,590	CONFIRMATION NO. 6958
		FILING DATE June 27, 2006	
ASSIGNEE NATIONAL INSTITUTES OF HEALTH	EXAMINER (if known)		ART UNIT (if known)
TITLE OF APPLICATION AMPHIPHILIC PYRIDINIUM COMPOUNDS, METHOD OF MAKING AND USE THEREOF			

COMMISSIONER FOR PATENTS
P.O. BOX 1450
ALEXANDRIA, VA 22313-1450

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint the practitioners associated with Customer Number



to transact all business in the U.S. Patent & Trademark Office in connection with this application.

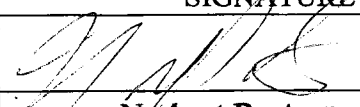
Please change the correspondence address for the above-identified application to the address associated with the aforementioned Customer Number.

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of a part of the entire interest (See 37 CFR 3.71). A

statement under 37 CFR 3.73(b) is enclosed. A revocation and statement under 37 CFR 3.73(b) for each additional assignee of record is also being submitted herewith.

SIGNATURE of Assignee of Record			
Signature			
Name	Norbert Pontzer	Title	Technology Licensing Specialist
Date	MAY 23 2008	Telephone	301-485-1190
NOTE: Signatures of all of the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required.			

301-435-5502

A total of 4 form(s) is/are submitted.